

## ANSI ASC X12N 837v4010A1 Long Term Care (LTC) Data Specifications Change Log

Date of Change	Page	Loop/ Txn	Segment/ Element Ref	Segment Name	Data Element/Field Name (Industry)	Description of Change
03/16/2005	all	NA	NA	NA	NA	Fixed erroneous duplication of segments and elements.
01/21/2005	all	NA	NA	NA	NA	Reformatted document in its entirety.
01/21/2005	40	2300	PWK01	Claim Supplemental Information	Attachment Report Type Code	Added PWK segment to link attachments with electronic claims.
01/21/2005	40	2300	PWK02	Claim Supplemental Information	Attachment Transmission Code	Added PWK segment to link attachments with electronic claims.
01/21/2005	40	2300	PWK05	Claim Supplemental Information	Identification Code Qualifier	Added PWK segment to link attachments with electronic claims.
01/21/2005	40	2300	PWK06	Claim Supplemental Information	Attachment Control Number	Added PWK segment to link attachments with electronic claims.

The page numbers for the following changes are based on the previous format. They do not apply to the current format of the specifications.

Date of Change	Page	Loop/ Txn	Segment/ Element Ref	Segment Name	Data Element/Field Name (Industry)	Description of Change
12/15/2003	1	2300	CLM02	Claim Information	Total Claim Charge Amount	Changed number of characters captured by Medi-Cal (length in parenthesis) from 10 to 9.
12/15/2003	1	2300	CLM05-1	Claim Information	Facility Type	Added clarifying language on where to find code values.
12/15/2003	1	2300	CLM05-3	Claim Information	Claim Frequency Code	Added clarifying language on where to find code values and corrected description of value "1".
12/15/2003	3	2300	DTP02	Statement Dates	Statement Date Qualifier	Added clarifying language that no spaces are allowed when submitting from/thru dates.
12/15/2003	4	2300	AMT02	Payer Estimated Amount Due	Estimated Claim Due Amount	Added clarifying language about how this data is reported on the CMC error reports and changed the number of characters captured by Medi-Cal (length in parenthesis) from 10 to 9.
12/15/2003	4	2300	AMT02	Patient Paid Amount	Patient Amount Paid	Changed the number of characters captured by Medi-Cal (length in parenthesis) from 10 to 9.
12/15/2003	5	2300	K3	File Information		Changed clarifying language.
12/15/2003	6	2300	NTE	Billing Note		Changed clarifying language.
12/15/2003	6	2300	HI	Condition Information		Changed clarifying language.
12/15/2003	7	2300	HI01-02	Condition Information	Condition Code	Added clarifying language on where to find the code values.
12/15/2003	9	2320	SBR09	Other Subscriber Information	Claim Filing Indicator Code	Bolded since Medi-Cal captures this data.
12/15/2003	12	2320	AMT02	Payer Prior Payment	Other Payer Patient Paid Amount	Changed number of characters captured by Medi-Cal (length in parenthesis) from 10 to 9. Added Clarifying language.
12/15/2003	16	2400	SV203	Institutional Service Line	Line Item Charge Amount	Added number of characters captured by Medi-Cal (length in parenthesis).
12/15/2003	16	2430	SVD03	Service Line Adjudication Information	Composite Medical Procedure	Removed following Data Element Separator.